



Military Service Questionnaire

(For Informational Purposes Only)

CalHFA Manifest Number: _____

Property Address _____

Borrower Name: _____

Co-Borrower (1) Name: _____

Co-Borrower (2) Name: _____

Co-Borrower (3) Name: _____

Military Service: Is this person now serving, or has this person ever served on active duty in the U.S. Armed Forces, Military Reserves, or National Guard?

Borrower:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Decline to Report
Co-Borrower (1):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Decline to Report
Co-Borrower (2):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Decline to Report
Co-Borrower (3):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Decline to Report

Signature of Borrower

Date

Signature of Co-Borrower (1)

Date

Signature of Co-Borrower (2)

Date

Signature of Co-Borrower (3)

Date